

Epi Update for Friday, February 15, 2019
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's Epi Update include:

- **Information from the Centers for Disease Control and Prevention: U.S. healthcare infection prevention and control considerations**
- **Legionellosis: cases on the rise, testing options**
- **In the news: Great strides in world health, but it could be so much better**
- **In the news: How New York separated immigrant families in the smallpox outbreak of 1901**
- **Infographic: The 5 Major Symptoms of a Heart Attack**
- **Meeting announcements and training opportunities**

Information from the Centers for Disease Control and Prevention: U.S. healthcare infection prevention and control considerations

The ongoing outbreak of Ebola virus disease (EVD) in the Democratic Republic of Congo (DRC) serves as a reminder for U.S. healthcare facilities to review their infection prevention and control processes to safely identify and manage patients with communicable infections. For current health issues by country, see the CDC's Traveler's Health Page:

<https://wwwnc.cdc.gov/travel/notices>

Please see the below information from the Centers for Disease Control and Prevention that highlights the importance of the "identify, isolate, and inform" approach which includes a brief screen for travel at the point of initial triage (note that this is different from a full travel history that should be performed as part of a clinical visit). Facilities should consider how to best implement this recommendation in a way that can be adjusted to address emerging outbreaks. For example, a current screen might ask about travel to the Arabian Peninsula in the past 14 days for risk of exposure to MERS as well as travel to the DRC in the past 21 days for risk of exposure to Ebola. The Iowa Department of Public Health is available for consultation as needed (800-362-2736 and after-hours through the State Patrol at 515-323-4360).

CDC has provided recommendations for U.S. healthcare workers and sponsoring organizations to ensure workers are healthy when they return to the United States.

Initial Triage of Patients

Here are the steps that facilities should implement as a routine part of triage to quickly identify, isolate and inform public health authorities about patients who may have communicable infections:

- Ask about and document international travel histories at initial triage. This information can alert healthcare personnel to the possibility of communicable infections, such as viral hemorrhagic fevers or emerging respiratory viruses and other health conditions, such as malaria, that need specific treatment.
- Identify patients who have fever and other signs and symptoms of infection and might warrant isolation pending further evaluation.
- Post contact information in easily visible locations for infection control personnel and the local public health jurisdiction for reporting of communicable diseases.

Additional Resources

Main CDC EVD portal: www.cdc.gov/vhf/ebola/index.html.

World Health Organization Ebola situation reports: Democratic Republic of the Congo: www.who.int/ebola/situation-reports/drc-2018/en/.

CDC Travel Health Notice for the current outbreak in DRC, including special recommendations for healthcare personnel and organizations sponsoring healthcare personnel in the outbreak area: wwwnc.cdc.gov/travel/notices.

The National Institutes of Health (NIH) has an open-label clinical trial, entitled “Pre-Exposure Prophylaxis in Individuals at Potential Occupational Risk for Ebola Virus Exposure” or “PREPARE,” to vaccinate adult volunteers (including deploying healthcare personnel and other responders) against Ebola: clinicaltrials.gov/ct2/show/NCT02788227.

Legionellosis: cases on the rise, testing options

Iowa, like the rest of the U.S., has seen a steady increase in reported legionellosis (Legionnaire’s disease) cases. The reason for the increase is unclear. Potential contributing factors include increased testing, awareness, environmental exposures or patient susceptibility. The known risk factors for legionellosis include age over 50 years, smoking, chronic lung disease or other underlying illness, overnight stays in hotels or healthcare facilities, and exposure to hot tubs. Local public health and IDPH work together to interview all persons with reported legionellosis to identify possible shared exposure locations or other risk factors.

The recommended tests for diagnosing legionellosis are both a culture of a lower respiratory specimen on selective media and the Legionella urine antigen test. While the urine antigen test can produce a quick result, it can only detect Legionella pneumophila serogroup 1. A patient with a negative urinary antigen test may have Legionnaires’ disease caused by other Legionella species or serogroups. Culture can detect multiple species and serogroups and allows for comparison of clinical and environmental isolates to identify possible sources of infection. Specimens sent to SHL for Legionella culture can also be tested via PCR, which has a quicker turnaround time than culture. SHL also performs Legionella cultures from clinical specimens and environmental sources. IDPH encourages healthcare providers to submit a pre-antibiotic treatment specimen for culture and/or PCR.

For more information, contact SHL at 319-335-4335 or visit the SHL webpage links below for test details with collection and submission instructions.

For culture testing with or without PCR, visit www.shl.uiowa.edu/testmenu/menupages/legionella.xml.

For PCR only requests, visit www.shl.uiowa.edu/testmenu/menupages/legionellapcr.xml.

For more information about Legionella, visit idph.iowa.gov/cade/disease-information/legionella.

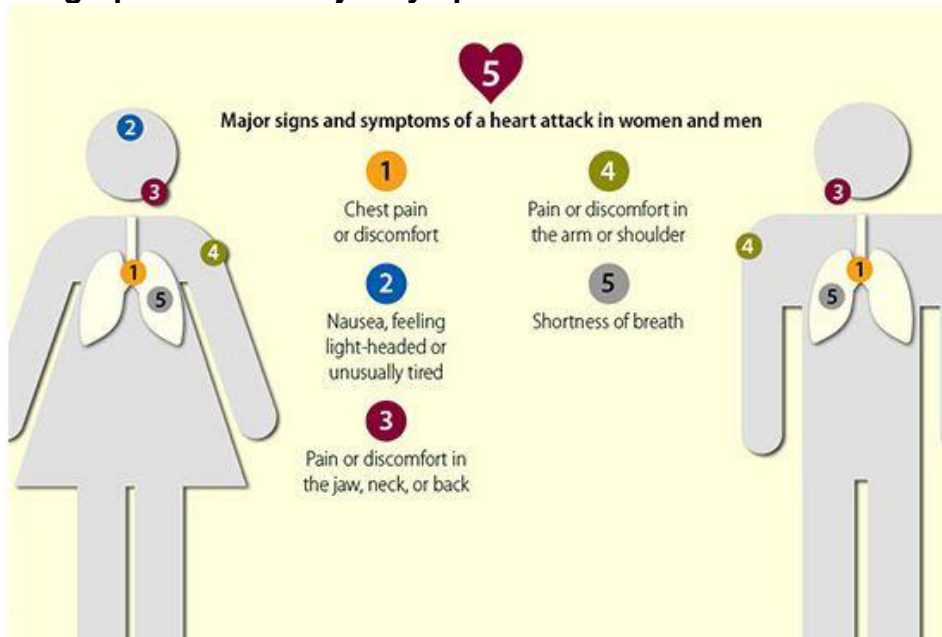
In the news: Great strides in world health, but it could be so much better

www.nytimes.com/2019/02/04/upshot/giant-strides-in-world-health-but-it-could-be-so-much-better.html

In the news: How New York separated immigrant families in the smallpox outbreak of 1901

www.smithsonianmag.com/history/how-new-york-separated-immigrant-families-smallpox-outbreak-1901-180971211/

Infographic: The 5 Major Symptoms of a Heart Attack



To view in full size, visit www.cdc.gov/heartdisease/signs_symptoms.htm.

Meeting announcements and training opportunities

None

Have a healthy and happy week!

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800-362-2736